

## J-1 Visa Waiver Program

## **National Interest Waiver Letter of Support Requirements**

Each national interest waiver packet must contain the items listed within the DRA checklist.

If documentation required in the NIW checklist is omitted or does not meet the Delta Doctors Program Guidelines, the application will be mailed back to the attorney and will be placed in the back of the current applications that are in the DRA queue for review. The NIW checklist should be completed and included in the J-1 visa waiver application to the Authority. *Delta Regional Authority will only provide letters of support for physicians who have participated or are participating in the Delta Doctors Program.* 

- > Send the original directly to Delta Regional Authority.
- ➤ Place the U.S. Department of State Case Number on all pages.
- Tab the application by the numbers listed below in the following order.

Please send the application to:

Delta Regional Authority Attn: Anita Stasher 236 Sharkey Avenue, Suite 400 Clarksdale, MS 38614

DRA will make a decision on issuing a support letter upon receipt and review of the following:

Documents required for NIW support letter requested in conjunction with a J-1 waiver:

- 1. A letter of opinion from a legal counsel stating "to the best of their knowledge, the information in the application is truthful, and that he/she believes the applicant is eligible for a NIW"; this should be stated in the original letter of opinion.
- 2. A statement from the physician's employer committing support for the physician's NIW, which should be in the Employer Cover Letter.

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- 3. A short testimonial from the physician expressing his/her reason for pursuing an NIW, which should be expressed in the physician statement.
- 4. An executed employment contract between the physician and his/her employer, which commits the physician to five years of service in a DRA underserved county or parish.

## Documents required for NIW support letter requested after waiver has been granted:

- 1. A letter of opinion from a legal counsel stating "to the best of their knowledge the information in the application is truthful, and that he/she believes the applicant is eligible for a NIW."
- 2. A statement from the physician's employer committing support for the physician's NIW.
- 3. A short testimonial from the physician expressing his/her reason for pursuing an NIW.
- 4. An executed employment contract between the physician and his/her employer which commits the physician to two or more additional years of service in a DRA underserved county or parish. Self-employed physicians must present an affidavit committing him/her to two or more additional years of service.
- 5. Copies of diplomas, licenses, board certifications, and USMLE scores.
- 6. A copy of the physician's complete passport, I-129 Immigrant petition, H-1B approval notices and I-94.

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